1 2 3 4	E-filing AUG 1 3 2007		
5 6 7	CLERK, U.S. DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA OAKLAND		
8	UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA		
10 11	LUZ ELVIA BHULLAR Plaintiff, CASE NO.		
12 13	vs. PRISONER'S APPLICATION TO PROCEED IN FORMA PAUPERIS		
14 15	MR. COPENHAGER Defendant.		
16 17	I, LUZ E. BHULLAR, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application		
18	is true and correct. I offer this application in support of my request to proceed without being		
19 20	required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am		
21	entitled to relief.		
22	In support of this application, I provide the following information:		
23	1. Are you presently employed? Yes NoX		
24	If your answer is "yes," state both your gross and net salary or wages per month, and give the		
25	name and address of your employer:		
26	Gross: Net:		
27	Employer:		
28			

salary and v	er is "no," state the date of last employment wages per month which you received. (I aployment prior to imprisonment.) Mortgage, Folsom, California e you received, within the past twelve (12 pources: Business, Profession or	f you are imprisoned, specify the last "2005" \$500. Ant. 2) months, any money from any of the
place of em Coast Coast Have following so	Mortgage, Folsom, California e you received, within the past twelve (12 purces:	"2005" \$500. Ant. 2) months, any money from any of the
2. Hav	Mortgage, Folsom, California e you received, within the past twelve (12 purces:	2) months, any money from any of the
2. Hav	e you received, within the past twelve (12 ources:	2) months, any money from any of the
following so	ources:	
following so	ources:	
following so	ources:	
a.	Business, Profession or	
		Yes No <u>X</u>
	self employment	
b.	Income from stocks, bonds,	Yes NoX
	or royalties?	
c.	Rent payments?	Yes No _X
d.	Pensions, annuities, or	Yes No _ <u>x</u> _
	life insurance payments?	
e.	Federal or State welfare payments,	Yes NoX
	Social Security or other govern-	
	ment source?	
If the answer	r is "yes" to any of the above, describe ea	ch source of money and state the amount
received from	m each.	
3. Are y	ou married?	Yes NoX
Spouse's Ful	l Name:	
Spouse's Plac	ce of Employment:	
•		
Gross \$	Net \$	
4. a.	List amount you contribute to your spo	ouse's support:\$
	d. e. If the answe received from 3. Are y Spouse's Ful Spouse's Pla Spouse's Mo Gross \$	d. Pensions, annuities, or life insurance payments? e. Federal or State welfare payments, Social Security or other government source? If the answer is "yes" to any of the above, describe eareceived from each. 3. Are you married? Spouse's Full Name: Spouse's Place of Employment: Spouse's Monthly Salary, Wages or Income: Gross \$

1	b. List the persons other than your spouse who are dependent upon you for		
2			
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4	THEIR NAMES.).		
5	DB. 16, AB. 15, SB, 8, \$1.50 amount		
6	#		
7	5. Do you own or are you buying a home? Yes NoX		
8	Estimated Market Value: \$ Amount of Mortgage: \$		
9	6. Do you own an automobile? Yes NoX		
10	Make Year Model		
11	Is it financed? Yes No If so, Total due: \$		
12	Monthly Payment: \$		
13	7. Do you have a bank account? Yes No X (Do not include account numbers.)		
14	Name(s) and address(es) of bank:		
15			
16	Present balance(s): \$		
17	Do you own any cash? Yes No _X Amount: \$		
18	Do you have any other assets? (If "yes," provide a description of each asset and its estimated		
19	market value.) Yes X No		
20	\$15.02 @ FPC- Dublin		
21	8. What are your monthly expenses?		
22	Rent: \$ Utilities:		
23	Food: \$ 100.00 Clothing:		
24	Charge Accounts:		
25	Name of Account Monthly Payment Total Owed on This Acct.		
26	FRP Plan Type \$ 25.00 \$ \$300.00		
27	\$\$		
28	\$\$		
- 1			

	9. Do you have any other debts? (List current obligations, indicating amounts and to
2	whom they are payable. Do <u>not</u> include account numbers.)
3	3
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5	Does the complaint which you are seeking to file raise claims that have been presented
6	in other lawsuits? Yes No _X
7	Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in
8	which they were filed.
9	
10	
11	I consent to prison officials withdrawing from my trust account and paying to the court
12	the initial partial filing fee and all installment payments required by the court.
13	I declare under the penalty of perjury that the foregoing is true and correct and
14	understand that a false statement herein may result in the dismissal of my claims.
15	JA)
16	8 8 07 Jun
17	DATE SIGNATURE OF APPLICANT
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